

**ANNUAL STATISTICAL REPORT ON
CHILDREN IN FOSTER HOMES AND CHILDREN IN FAMILIES RECEIVING PAYMENTS
IN EXCESS OF THE POVERTY INCOME LEVEL
FROM A STATE PROGRAM FUNDED UNDER PART A OF
TITLE IV OF THE SOCIAL SECURITY ACT**

State _____ State Agency _____

Report for the month of October 200 _____

Prepared by:

Name _____
Title _____
Signature _____

Part I.

NUMBER OF CHILDREN AGED 5-17 IN FOSTER HOMES

State total _____

(if entry is greater than zero (0), attach a separate list in the following format.)

CHILDREN AGED 5-17 IN FOSTER HOMES

A. by COUNTY			B. by LOCAL EDUCATIONAL AGENCY (LEA)		
County name	FIPS County Code	Number	LEA name	LEA Code (Agency ID)	Number

Part II.

**NUMBER OF CHILDREN AGED 5-17 IN FAMILIES RECEIVING PAYMENTS IN EXCESS OF
THE AMOUNT SPECIFIED FOR THIS REPORT PERIOD FROM A STATE PROGRAM FUNDED UNDER
PART A OF TITLE IV OF THE SOCIAL SECURITY ACT**

State total _____

(if entry is greater than zero (0), attach a separate list in the following format.)

CHILDREN AGED 5-17 IN FAMILIES RECEIVING PAYMENTS IN EXCESS OF \$ _____

A. by COUNTY			B. by LOCAL EDUCATIONAL AGENCY (LEA)		
County name	FIPS County Code	Number	LEA name	LEA Code	Number